



Child Start Date (Office Use): \_\_\_\_\_

## Northfield Community Nursery School

www.nfcns.org | 847.446.1116 | 400 Wagner Road, Northfield

### Application and Contract 2020 – 2021 School Year

All fields must be filled in order to validate the contract.

Child's Full Name: \_\_\_\_\_

Name to be used at school: \_\_\_\_\_ Child's birthdate: \_\_\_\_\_ Age on 9/1/20: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*Parent / Guardian Name: \_\_\_\_\_ Workplace (if applicable): \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Schedule: \_\_\_\_\_

\*Home Phone: \_\_\_\_\_ \*Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

\*Parent / Guardian Name: \_\_\_\_\_ Workplace (if applicable): \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Schedule: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

\*Email Address(es) to be used for all school communication: \_\_\_\_\_

\*Asterisked information will be included in the school directory.

If you do not wish to have your contact information in the school directory, check here: \_\_\_\_\_

Elementary School District (name, city): \_\_\_\_\_

#### Class Selection (check all that apply)

##### Two Year Olds

- |  |                             |                   |
|--|-----------------------------|-------------------|
| <input type="checkbox"/> <b>2s</b> (2 by 9/1) Mondays & Tuesdays, 8:30am – 11:00am                       | \$500 deposit and \$1827.50 | <b>\$2,327.50</b> |
| <input type="checkbox"/> <b>Almost 3s</b> (2 by 4/1) Wednesdays, Thursdays and Fridays, 8:30am – 11:00am | \$500 deposit and \$2763.09 | <b>\$3,263.09</b> |

*Older 2s (2 by 4/1) may enroll in both the M/T 2s class and the W-F Almost 3s class. Please note that children must be 2 by 4/1 in order to enroll in Almost 3s.*

##### Three Year Olds

- |  |                             |                   |
|--|-----------------------------|-------------------|
| <input type="checkbox"/> <b>3 Day Class</b> (3 by 9/1) Monday – Wednesday, 8:45am – 11:15 am | \$500 deposit and \$2535.71 | <b>\$3,035.71</b> |
| <input type="checkbox"/> <b>4 Day Class</b> (3 by 9/1) Monday – Thursday, 9 am – 11:30 am    | \$500 deposit and \$3286.05 | <b>\$3,786.05</b> |

##### Four Year Olds

- |  |                       |                             |
|--|-----------------------|-----------------------------|
| <input type="checkbox"/> Pre-Kindergarten (4 by 9/1) Monday – Friday, 12:15pm – 2:45pm |                       |                             |
|  | Or 12:00 pm – 2:30 pm | \$500 deposit and \$3853.71 |
|  |                       | <b>\$4,353.71</b>           |

*NFCNS reserves the right to make scheduling changes due to enrollment needs. At the beginning of the year and on special occasions, the class time may be shortened to allow for age-appropriate transitions.*

ENROLLMENT FEE: I wish to enroll my child at the Northfield Community Nursery School and I am including the required **non-refundable deposit** required for my requested class. A separate enrollment application and fee must be completed for each child to be

enrolled. Checks should be made payable to Northfield Community Nursery School. I understand that the non-refundable deposit will only be returned to me if my child was placed on a waiting list and is not placed in a program or if a class was canceled by NFCNS.

**TUITION PAYMENT:** I understand that Northfield Community Nursery School is to be an eight month program from October through May and that tuition fees are non-refundable. Monthly payment plans are available; a payment plan may be established by contacting the NFCNS Business Manager. Nonpayment of tuition may result in the exclusion of my child from Northfield Community Nursery School. Any checks returned for insufficient funds or stop payment will be the responsibility of the family and are not to be paid by NFCNS. A \$25 fee will be assessed for checks returned for insufficient funds or stop payment.

**WITHDRAWAL:** SHOULD I DECIDE TO WITHDRAW MY CHILD FROM NORTHFIELD COMMUNITY NURSERY SCHOOL, I MUST NOTIFY THE TREASURER AND DIRECTOR IN WRITING BEFORE SEPTEMBER 18, 2020 OR I WILL BE LIABLE FOR THE FULL YEAR'S TUITION. IF I WITHDRAW MY CHILD AFTER SEPTEMBER 19, 2020, A REFUND OF ANY UNUSED TUITION WILL BE CONSIDERED ONLY IF THE CORRESPONDING CLASS IS FULL AND THE RESULTING VACANCY IS FILLED. If the Director determines the need for a child to withdraw, the unused tuition will be refunded.

**CANCELLATION:** Northfield Community Nursery School reserves the right to cancel a class due to low enrollment. In the event of such a cancellation, a full refund, including enrollment fees, will be made.

**FINANCIAL AID:** I understand that Financial Aid may be available on an as needed basis and I am to contact the NFCNS President or Treasurer for more information.

**SCHOOL REGISTRATION FORMS:** The Illinois Department of Children and Family Services and NFCNS require specific forms for each child prior to the start of school, which include but are not limited to, a physical examination and birth certificate. I agree to comply with and provide all required documents.

**PHOTOGRAPHS:** I understand that Northfield Community Nursery School may use photographs of its students in promotional materials \_\_\_\_\_ or on its website and social media accounts including, but not limited to, Facebook and Instagram \_\_\_\_\_, and in local publications \_\_\_\_\_. By executing this contract and initialing next to any option, I consent to the use of my child's photograph or other likeness in the designated promotional materials. \_\_\_\_\_ (Parent or Guardian Initials next to each use you approve)

I wish to enroll my child in Northfield Community Nursery School in the program noted below on this application/contract. I am enclosing an executed/signed copy of this application/contract along with the appropriate non-refundable deposit. I understand that this contract becomes a binding agreement only when accepted by the Northfield Community Nursery School.

\*\*I would like to enroll my child in the \_\_\_\_\_ class(es) for the 2020 – 2021 school year.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Signature of NFCNS Official

\_\_\_\_\_  
Printed Name of Parent or Legal Guardian

\_\_\_\_\_  
Printed Name of Signature of NFCNS Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**Payment Options:**

- Pay By Check

Please make deposit check payable to Northfield Community Nursery School and submit with this form. You will receive notice when subsequent installments are due. You may also opt to pay tuition in full at this time

- Pay By Credit Card (Subject to 2.8% servicing fee.)

Pay Deposit: \_\_\_\_\_ Pay in Full: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- I would like to make a donation to the NFCNS Annual Fund: Amount: \$ \_\_\_\_\_